STATEMENT OF DESIGNATION OF COUNSEL

SCUIT LEWIS

MUR 4646
NAME OF COUNSEL: JACK SCAROLA
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E.
The above-named individual is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.
7/31/98 Caul Lewis Date Signature
Date Signature
RESPONDENT'S NAME: CAROL J. LEWIS
ADDRESS: 375 POSSUM PASS
W. PALM BEACH, FL 33413
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BUSINESS()